

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	H-S	866	1-16-01 61-30-001
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral).... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
1	Original 2/22/01
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5	✓
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Claim	Date
51	✓
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions
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